APPLICATION FOR APPOINTMENT TO A SAN LUIS OBISPO COUNTY BOARD OF SUPERVISORS BOARD, COMMISSION OR COMMITTEE

Date7/19/2011	
Applying for appointment to San Luis Obispo County Child Care Planning Co	<u>un</u>
(Name of Board, Commission or Committee)	
Name Maddy Quaglino	
Address	
Business Phone3 Phone	
Fax Phone 481-2693 E-mail Address	
Supervisorial DistrictYears resided in County	
If retired, Past Occupation/Employer	
Education	
June 1987 - California Polytechnic State University - Technical Certification in Ornamental	

Horticulture

May 2002 - Allan Hancock- Associated of Science Degree in Early Childhood Education May 2008 - University of La Verne - Bachelor of Science Degree in Child Development

List work experience, training, volunteer activities, skills that relate to your qualifications

I have been a childcare provider in San Luis Obispo County for 21 years. In the first 11 years, I was a family daycare provider, whereas through had work and dedication, I received a National Accreditation for Family Childcare in 2001, through the National Association for Family Child Care. The following 10 years, I have been working in a private non-profit preschool program; five of which I was a teacher and the more recent five years I have been a director. In my early years of childcare, my endeavors for professionalism steered me to co-found the Family Child Care Association of San Luis Obispo County of which I later became the president. As the president, I was able to build relationships and work cooperatively with several organizations: Equal Opportunity of Commission Child Care Resource Connection, San Luis Obispo Child Care Planning Council of San Luis Obispo County, Cuesta College Department of Early Childhood, the Associated Student Incorporated Children Center of Cal Poly, and the University of California Davis. As a result of working with

to produce training series, which included early child education credits through Cuesta College for childcare professionals.
Commission Application Page Two
List dates/names of positions you have held on any advisory body or elected office
List Membership to Organizations
National Association for the Education of Young Children California Association for the Education of Young Children
Please explain why you would like to serve in this capacity
As a member of San Luis Obispo Child Care Planning Council, I will be professional, responsible, and accountable I will strive to foster relationships while advocating to ensure quality childcare for young children and youth tin San Luis Obispo County.
If appointed, are you willing to participate in the majority of meetings each year, and if necessary in numerous related meetings or subcommittees?
X YES NO COMMENTS
If appointed, are you willing, if required, to file a Statement of Disclosure as a Public Official Under the standards of the Fair Political Practice Commission?
X_YESNOCOMMENTS
If appointed, do you want to have your address or telephone number(s) published?
X YES NO COMMENTS

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Applicants for the San Luis Obispo County Child Care Planning Council must live or work in San Luis Obispo County, and exhibit:

- a strong commitment to advocating for increased quality child care services
- an ability to make information-based decisions;
- excellent leadership skills.

Name: Maddy Quaglino
Check ALL categories under which you are applying for nomination: Child Care Consumer Child Care Provider Public Agency Representative Community Representative
Appointments to the Council are made available to individuals, not organizations. Based on the definitions on the preceding page, please give an explanation of why you marked the category above. I have been a child can provider for twenty flars to years have has been in family child care and it years have been in a private non-profit preschool.
Every effort is made to ensure that the ethnic, racial and geographic composition of the SLOCoCCPC is reflective of the diversity of the population of our county. Please complete the following:
In what part of the county do you work? \Box North \Box South \Box SLO \Box Coast
In what part of the county do you live?
Gender: Female 🗅 Male
Ethnic Origin: 🔲 African-American 🔲 Hispanic 🗀 Asian-American/Pacific Islander
Native American White O Other:
APPLICATION STATEMENT: On a separate page, attached to this form, please explain in your own words your qualifications. Describe your community, professional, or personal experiences that enable you to provide leadership and work collaboratively with diverse groups of people. Please list specific contributions you would make to the work of the Planning Council.
I understand that this application will be processed as described, and does not guarantee me a position on the Council. I also understand that if any member or prospective member does not meet the terms of the application and/or membership agreement at the time of appointment or during the term of appointment to the Council, then the Membership Committee may recommend to the appointing authority (BOS, SLOCOE) that the member be removed or that a prospective member not be appointed. Signature: Date: 1/19/201